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OF COMMENCE

DESCRIPTION OF COME Substitute for Form PTO-875 Application or Doctor Minutes CLAIMS AS FILED - PART I (Column i) (Calumn 2) SMALL ENTITY OTHER THAN FOR. OR NUMBER FILED SMALL ENTITY BASIC FEE NUMBER EXTRA (37 CFR 1.16(a)) RATE , · . FEE TOTAL CLAIM RATE (37 CFR-1.16(c)) 385. a minus 20 = OR 790.02 INDEPENDENT CLAIMS (37 OFR 1.16(b)) ×:25 . x **:5**0 enthus 3 = OR x 2/00 = MULTIPLE DEPENDENT CLAIM PRESENT x 200. OR (37 CFR 1.16(d)) 180. ' If the difference in column t is less than zero, enter "O" in column 2. ÓR TOTAL CLAIMS AS AMENDED - PART II OR TOTAL (Column 1) (Column 2) (Column 3) CLAMS SMALL ENTITY OTHER THAN HIGHEST REMAINING NUMBER PREVIOUSLY SMALL EYMIY PRESENT AFTER RATE MENDAMENT EXTRA ADDL PAID FOR RÀTE Folal (at CFR 1.16(at) TIONAL ADDI-Klinus FEE Independent (SFOR 1.16(b)) **a**5 FEE Mirite OR <u>×4</u>50 FIRST PRESENTATION OF WILLTIPLE DEPENDENT CLAIM (37 OFR 1.16(d)) **6**0 x 200 OR +180 +800 OR TOTAL ADD'L FEE TOTAL OR (Column 1) ADD'L FEE (Column 2) m CLAMS HIGHEST REMAINING NUMBER PRESENT AFTER PREVIOUSLY RATE **EXTRA** ADOI-MENDMENT PAID FOR RATE · Total TIONAL ADDi. Minus TIONAL 25 for OFR LIGOT FEE ú Mine × = 50 OR 100 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(4)) OR +=300 OR TOTAL ADD'L FEE TOTAL OR (Catuma 1) ADD'L FEE (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PREVIOUSLY PRESENT AFTER RATE EXTRA ADDI-KENDMENT RATE Total (STORR 1.16(o)) PAID FOR JAMONAL ADDI ₹ Minus TIONAL FEE K Independent : Minus ×1.50 OR: IDD FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) × 200 OR

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TOTAL ADO'L FEE

s if the entry in column 1 is less than the entry in column 2, write "C'do, column 3."
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "7.

The Thighest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to the land by the public which is to the land by the public which is to the familiar to the land of the land by the public which is to the land by the pub USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclividual case. Any comments on the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

+ :200

TOTAL .

ADD'L FEE

OR

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